Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER California Democratic Party			Date of This Filing10/27/2017	Date Stamp	CALIFORNIA FORM 497		
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 741666		Report No. LCR 171027		For Official Use Only		
STREET ADDRESS			Amendment to Report No.	Page 1 of 3			
CITY Sacramento	STATE CA	ZIP CODE 95811	(explain below) No. of Pages3				

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
10/26/2017	AT&T Inc. and its Affiliates Sacramento, CA 95814-3947	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		\$5,000.00
10/26/2017	Bracamontes for Governor 2018 San Francisco, CA 94104 ID# 1396598	☐ IND ■ COM ☐ OTH ☐ PTY ☐ SCC		\$3,000.00
10/26/2017	CSLEA PAC Sacramento, CA 95814-3963 ID# 970375	☐ IND ■ COM ☐ OTH ☐ PTY ☐ SCC		\$25,000.00

*Contributor Codes	
IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other	PTY - Political Party SCC - Small Contributor Committee

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER California Democratic Party			Date of This Filing	10/27/2017	Date Stamp	CALIFORNIA FORM 497		
		I.D. NUMBER (if applicable) 741666 Report No		LCR 171027		For	For Official Use Only	
STREET ADDRESS			Amendment to Report No.		Page 2 of 3			
amento STATE ZIP CODE CA 95811		(explain below) No. of Pages	3					
n(s) Received			,			'		
FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			RIBUTOR	CONTRIBUTOR CODE *		AMOUNT RECEIVED		
an Francisco, CA 94115	vernor 2018			☐ IND ■ COM □ OTH □ PTY □ SCC			\$1,000.00	
				☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
				□ IND □ COM □ OTH □ PTY □ SCC				
1	n(s) Received	TA1666 STATE CA n(s) Received FULL NAME, MAILING ADDRESS A (IF COMMITTEE, AI leni Kounalakis for Lt. Governor 2018 an Francisco, CA 94115	T41666 STATE ZIP CODE 95811 n(s) Received FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) leni Kounalakis for Lt. Governor 2018 an Francisco, CA 94115	Report No	Report No. LCR 171027 Amendment to Report No. (explain below)	I.D. NUMBER (# applicable) 741666 Report No LCR 171027 Amendment to Report No Coperation No. of Pages 3 Total	Report NoLCR 171027 Amendment to Report No(explain below)	

Reason for Amendment:

OTH - Other

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Late Contribution Report

Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER California Democratic Party AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable) 741666 STREET ADDRESS CITY STATE ZIP CODE Sacramento CA 95811		I.D. NUMBER (if applicable) 741666 Report No. LCR 171027 Amendment to Report No			Date Stamp Page 3 of 3	FORM 497 For Official Use Only	
Late Contri	bution(s) Made			I	ı		
DATE FULL NAME, MAILING ADDRESS A MADE (IF COMMITTEE, ALSO		AILING ADDRESS AND ZIP C		CANDIDATE AND OFFICE OR MEASURE AND JURISDICTI	: ON	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC